PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

and the second second

CLAIMS AS FILED - PART I Column 1.					l (Colu	mn 2		SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS				<u> </u>				ATE I	FEE	Γ	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			SIC FEE	370 00	OR E	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			minus 20=		•		×	\$ 9=		,OR	X\$18=	
INDEPENDENT CLAIMS			_ minus 3 =		*		×	(42=		OR	X84=	
MULTIPLE DEPENDENT CLAIM PRESEN								140=		OR	+280=	
* If the difference in column 1 is less than zero, e					r "0" in c	olumn 2		OTAL		OR OR	TOTAL	.,
CLAIMS AS AMENDED - PAR (Column 1) (Colur						(Column 3)		MALL E	NTITY	OR	OTHER SMALL	1
AMENDMENT A	outer an	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST MBER OUSLY OFGR	PRESENT EXTRA	F	IATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total *	20	Minus	** 8	20	= (X	(\$ 9=		OR	X\$18=	
	Independent *		Minus	***	5	=	>	(42=		OR	X84=	
Ľ	FIRST PRESEN	TATION OF MI	JLTIPLE DEP	ENDEN	IT CLAIM		1	140=		OR	+280=	
							\	TÖTAL NT FEE		OR	TÖTAL ADDIT FEE	
	,)	(Column_1)			ımn 2)	(Column 3)	•	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREV	HEST MBER IOUSLY D FOR	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total *	25	Minus	** c	3c_	=)	(\$ 9=		OR	X\$18=	
	Independent	. <u>.</u>	Minus	***	<u>ک</u>	=	;	<42 -		OR	X84=	
Ľ	FIRST PRESEN	TATION OF MI	ULTIPLE DEP	ENDEN	II CLAIM		<u>،</u> ۲	140=		OR	+280=`	
							L	TOTAL DIT FEE	-	OR	TOTAL ADDAL FEE	
		(Column 1)			umn 2]	(Column _. 3)	_),, , <u></u> ,		-		-\ <u>-</u>
AMENDMENT C	A	CLAIMS REMAINING AFTER AMENDMENT		NUI PREV	HEST MBER //OUSLY DIFOR	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total .	*	Minus	**		=] [>	(\$ 9=		OR	X\$18=	
			Minus	***		=	 	X42=		OR	X84=	
	FIRST PRESEN	ITATION OF M	ULTIPLE DEF	'ENDE	NI CLAIN	1	ا ا	140=		OR	+280_	
	If the entry in colum	n 1 is less than t	the entry in solu	mn 2 iwr	te Cimio -	olumin 3 Valon (m. 1900)	<u> </u>	TOTAL		OR	TOTAL	
-	If the Highest Num *If the Highest Num The Highest Numt	ther Previously P	Paid For IN THI	S SPACE	Ers ⊎sst∺	an 3 lenter 3		DII FEE In the ap	t propriate bo	_	aggit FER	